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6. In case plague should continue to exist in the Province of the Don, it will be necessary to organize temporary medical sections to reinforce the medical personnel attached to the mines and factories in order to facilitate the discovery of the first case of plague. It will also be necessary to station physicians on the large plantations.

7. The physicians should educate the general public as to the measures to be taken in the combat against plague. More sanitary organizations should be created and those which already exist should be stimulated to greater activity.

8. All arriving laborers should be carefully examined.

9. In order that plague may be discovered as soon as it makes its appearance, the bacteriological laboratories should be supplied with the material and personnel necessary for making plague examinations.

10. In case of the appearance of plague the patients should be isolated:

1. Where there are special isolation hospitals for infectious diseases, in these hospitals.

2. Where there is only an ordinary hospital all the other patients should be removed, to make place for the plague patients.

3. If there is no hospital, isolation may be made in a school or other appropriate place. Only in extreme cases may the patient be allowed to remain in his own home, and then only after taking every possible precaution.

11. Persons who have been in contact with the patient should be isolated promptly, at the same time as the patient.

12. In cases where it seems sufficient, infected premises may be disinfected. Recourse need not be had to incineration except in the most extreme cases, and indemnity should be paid to cover loss made by disinfection or eviction.

13. The measures of isolation and disinfection should be administered as obligatory, but with tact.

14. In view of the unity of the measures for the combat against the infection, it is necessary that there be complete harmony between the authorities and the entire population.

SMALLPOX IN GERMANY.

OCCURRENCE DURING THE YEAR 1910 AND DURING THE PERIOD 1896-1910.

Abstracted from *Medizinal-Statistische Mitteilungen aus dem Kaiserlichen Gesundheitsamte*, v. 16, pt. 1.

BY EMILY R. JONES.

The number of cases of smallpox which occurred in the German Empire during the year 1910, as reported to the Imperial Bureau of Health, was 236 (previous year 247). Of this number 34 (14.41 per cent of the cases) terminated fatally. Nearly one-half the cases, viz, 105, occurred among foreigners, 87 being Russians, 9 Austrians, 5 Italians, 1 Swiss, 1 Spaniard, and 1 Portuguese. The proportion

of cases to 1,000,000 inhabitants was 3.66 (previous year 3.88), inclusive of cases in foreigners. Exclusive of foreign cases the proportion was only 2.03 (previous year 2.64).

As regards the Federal States, the 236 cases were distributed as follows: Prussia 170 (59 Russians, 2 Austrians, 1 Swiss), Bavaria 8 (1 Austrian, 1 Russian), Saxony 3 (2 Russians), Hesse 2 (Russians), Mecklenburg-Schwerin 8 (Russians), Oldenburg 1, Brunswick 1 (Russian), Saxon-Coburg-Gotha 1 (Russian), Anhalt 3 (2 Russians), Bremen 26 (7 Russians, 4 Austrians, 1 Swede), Hamburg 7 (3 Russians, 2 Austrians, 1 Spaniard, 1 Portuguese), and Alsace-Lorraine 6 (5 Italians, 1 Russian). In the remaining 14 Federal States no case of smallpox was notified during the year under report.

The cases were distributed in 118 localities, the average occurrence being 2 cases to 1 locality. The average duration of the disease was 31.2 days. According to ages, the cases occurred as follows:

Age.	Cases.	
	1910	1909
Under 1 year.....	11	11
2 to 3 years.....	8	8
3 to 10 years.....	31	26
11 to 20 years.....	60	45
21 to 30 years.....	35	53
31 to 40 years.....	38	39
41 to 50 years.....	18	41
51 to 60 years.....	20	16
More than 60 years.....	18	8
Total.....	236	247

The cases were distributed according to sex as follows: Male, 140, with 22 deaths; female, 96, with 12 deaths. In 2 cases there had apparently been a previous case of genuine smallpox, but in both, pock marks were absent.

The greatest number of cases occurred, as in the previous year, during the months of March, April, and May, corresponding with the movement of foreign laborers.

The cases were distributed by months as follows: January, 39; February, 20; March, 54; April, 56; May, 29; June, 5; July, 7; August, 1; September, 4; October, 6; November, 7; December, 8.

In 13 cases information was obtained as to complications. These were found to be inflammation of the lungs, abscesses, inflammation of the cellular tissue, thrombosis, inflammation of the larynx and respiratory tract, inflammation of the middle ear, inflammation of the connective tissue, and heart failure.

The course of the disease, and the vaccination status and ages of those attacked are shown in the following table:

Vaccination status.	Course.	Age (in years).										Total.
		1	2	3 to 10	11 to 20	21 to 30	31 to 40	41 to 50	51 to 60	More than 60		
Unvaccinated.....	Died.....	4	1	1	5	2	—	—	—	—	13	
	Severe or medium.....	2	1	2	12	2	—	—	—	—	19	
	Light.....	3	—	5	2	—	—	—	—	—	10	
Unknown.....	No data.....	—	1	—	1	—	—	—	—	—	2	
	Died.....	—	—	—	—	1	—	—	—	1	2	
	Severe or medium.....	—	—	—	—	—	—	—	—	1	1	
Vaccinated without result.	Died.....	—	—	—	—	1	—	—	—	—	1	
	Severe or medium.....	—	—	2	3	—	—	—	—	—	5	
	Light.....	—	—	—	—	—	—	1	—	—	1	
Vaccinated too late.....	Died.....	—	—	—	1	1	—	—	—	—	3	
	Severe or medium.....	1	1	—	3	—	—	—	1	—	5	
	Light.....	1	1	—	1	—	—	—	—	—	3	
Vaccinated once.....	Died.....	—	1	1	—	—	—	—	—	2	5	
	Severe or medium.....	—	—	2	4	2	2	2	1	—	13	
	Light.....	—	2	13	10	6	4	—	3	1	39	
Revaccinated too late.....	Died.....	—	—	—	—	—	—	—	1	2	3	
	Severe or medium.....	—	—	—	1	4	—	—	—	2	7	
	Light.....	—	—	4	5	1	2	—	—	2	14	
Revaccinated.....	No data.....	—	—	1	1	—	—	—	—	—	2	
	Died.....	—	—	—	2	—	2	—	2	1	7	
	Severe or medium.....	—	—	—	1	2	3	3	2	4	15	
Total.....	Light.....	—	—	—	7	12	22	14	8	1	64	
	No data.....	—	—	—	—	1	—	1	—	—	2	
Total.....		11	8	31	60	35	35	18	20	18	236	

The vaccination status of those attacked and the severity of the disease are shown in the following table:

Vaccination status of persons attacked.	Number.	Deaths.	Fatal-ity.	Course of the disease.				
				Severe or medium.		Light.		Not known.
				Number.	Per cent.	Number.	Per cent.	
Unvaccinated.....	44	13	<i>Per ct.</i> 29.5	19	43.2	10	22.7	2
Vaccinated without result.	7	1	14.3	5	71.4	1	14.3	
Vaccinated too late.....	11	3	27.3	5	45.5	3	27.3	
Vaccinated once.....	57	5	8.8	13	22.8	39	68.4	
Revaccinated too late.....	26	3	11.5	7	26.9	14	53.8	2
Revaccinated.....	88	7	8.0	15	17.0	64	72.7	2
Vaccination status unknown.....	3	2	66.7	1	33.3			
Total.....	236	34	14.4	65	27.5	131	55.5	6

PREVALENCE FROM 1896 TO 1910.

During the period from 1896 to 1910, 3,594 cases of smallpox occurred in the German Empire, as reported to the Imperial Bureau of Health. Of this number, 488 cases, or 13.62 per cent, terminated fatally. The greatest incidence of the disease occurred in the years 1908, with 434 cases, and 1900, with 392 cases. The case fatality varied from 8.09 per cent in 1899, to 18.36 per cent in 1906. Of the cases, 1,036 were in foreigners, the greatest number, 28.91 per cent,

being Russians. The average occurrence to 1,000,000 inhabitants, during the period named, was 4.09, including foreigners; exclusive of foreigners the rate was 2.91.

Of the 3,584 cases, 2,607, or 72.74 per cent, occurred in Prussia, and 380, or 10.60 per cent, in Alsace-Lorraine. The number of localities affected was 1,411, the average occurrence being 2.54 cases to one locality.

The vaccination status and course of the disease were as follows:

	Persons attacked.	Deaths.
Unvaccinated.....	603	187
Vaccination status unknown.....	192	79
Vaccinated unsuccessfully.....	61	12
Vaccinated too late.....	146	37
Vaccinated once.....	1,289	92
Revaccinated too late.....	200	14
Revaccinated.....	1,093	67
Not stated.....	63	(¹)
Total.....	3,584	488

¹ None of the cases in the group of "Not stated" ended fatally. The only data not given on the cards relative to these cases was as to whether the disease was severe or light.

The greatest number of unvaccinated persons were between the ages of 3 and 30, namely, 294, or 48.76 per cent of the 603 unvaccinated persons. This condition, which is apparently at variance with the requirements of the vaccination law, is explained by the vaccination status of the foreigners attacked, the Russo-Polish laborers who come for a season's work being for the most part between the ages of 15 and 30. How great this influence is, is shown by the following statement of the vaccination status of those attacked during the three years 1908, 1909, and 1910, divided into native and foreign groups:

	Native.	Foreign.	Total.
Unvaccinated.....	49	94	143
Unknown.....	15	13	28
Vaccinated unsuccessfully.....	9	21	30
Vaccinated too late.....	15	30	45
Vaccinated once.....	149	108	257
Revaccinated too late.....	48	35	83
Revaccinated.....	295	36	331
Total.....	580	337	917

The origin of the infection was traced in most of the cases to foreign sources, namely, to Russia. Comparison of the five-year period, 1906 to 1910, shows that for 1,380 out of 1,518 cases the importation of the infection was proved while in only 138 cases the source of the infection remained unknown.

Pursuant to a resolution of the Imperial Council of June 18, 1885, relative to the preparation of statistics of fatal cases of smallpox in the German Empire, reports of deaths were sent regularly from the

year 1886 to the Imperial Bureau of Health by the Federal States and Alsace-Lorraine. On July 16, 1885, the imperial chancellor addressed a circular letter to the governments of the States urging the collection of as full statistics as could be obtained relative to the occurrence of cases of smallpox, the material so collected to be elaborated by the Imperial Bureau of Health. The circular was accompanied by a model report card adapted to the purpose. The card was designed to be filled in by the attending physician, or if no physician was in attendance, by the local authority. Most of the Federal State governments and the governor of Alsace-Lorraine issued the necessary ordinances in compliance with the circular. When by ministerial ordinance of January 29, 1896, Prussia agreed to participate in the system of reporting by card it became possible to obtain complete and uniform statistics of the occurrence of smallpox throughout the Empire. Finally, by resolution of the Imperial Council January 28, 1904, the card-reporting system was enacted into law and made binding upon all the States of the Empire.

MALARIA.

THE USE OF TRYPSIN AND AMYLOPSIN IN ITS TREATMENT.

[Abstract of a report in the Journal of the Royal Army Medical Corps (London), December, 1913.]

Maj. F. W. Lambelle comments upon the current belief in the specificity of quinine in all kinds of malarial fevers. He states that his experience in China and India is not in accord with this belief, for in the Orient relapses frequently occurred after quinine treatment, both in the benign and malignant infections, and seemed as frequent in the one infection as in the other. As he states: "Patients return to hospital deaf from cinchonism, ill with fever, and showing parasites in the peripheral blood."

Beard had suggested the use of the pancreatic ferments, trypsin and amylopsin, to destroy the plasmodium of malaria. Lambelle first tried these ferments in January, 1913. He selected cases of severe infection and those showing relapses. Clinically, the results were said to be very noticeable, there being a marked change in the patient in a few hours, with permanent improvement.

The method of treatment was by intramuscular injections of the enzymes, trypsin and amylopsin. The trypsin dose had a digestive value of 1,250 "Roberts units" and the amylopsin one of 500 "Roberts amylolytic units." The preparations used were sterile and stable. The injections were made into the muscles of the buttock. The ferments diffuse slowly from the tissue and some local edema remains for 12 to 24 hours. There is very little local pain.